

# Desloratadine Eases Urticaria in Real-World Trial

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VICTORIA, B. C. — An open-label trial of Canadian patients seen in regular clinics and offices has confirmed that desloratadine treatment of chronic idiopathic urticaria is highly effective, Charles W. Lynde, M.D., said at the annual meeting of the Canadian Dermatology Association.

This is a result that previously had been

shown only in highly regulated, and perhaps artificial, clinic trials, he said.

In this study, 348 patients received 5 mg of the drug once daily for 2 weeks.

A total of 45% of the patients had complete or marked improvement, 19% had moderate improvement, 22% had mild improvement, and 14% had no improvement.

"We found this very effective for the relief of chronic urticaria," said Dr. Lynde of the University of Toronto.

Improvement was rated by both the treating physicians (on days 7 and 14 of treatment) and by the patients on a daily basis.

There was a high concurrence between physician and patient ratings.

At day 14 of treatment, mean scores rating pruritus fell by 55%, mean scores on hive numbers fell by 52%, and mean scores rating the overall condition fell 48%.

Desloratadine, which is a nonsedating, selective antihistamine, can often produce

improvement with the very first dose, Dr. Lynde added.

The study also looked at quality of life measures and found mean improvements of 30%-50% in all the specific areas examined. Some of these measures were sleep, self-consciousness, and even sexual activity.

Dr. Lynde said that in the past he has received financial support from Schering-Plough Corp., the company that manufactures desloratadine (Clarinet). ■

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<sup>1</sup>Zolpidem tartrate worldwide.

\*Next-day residual effects were evaluated in 7 studies involving normal volunteers. In 3 studies in adults (including 1 study in a phase-advance model of transient insomnia) and 1 study in elderly subjects, a small but statistically significant decrease in performance was observed in the Digit Symbol Substitution Test (DSST) when compared with placebo. Studies in nonelderly patients with insomnia did not detect evidence of next-day residual effects using the DSST, the Multiple Sleep Latency Test (MSLT), and patient ratings of alertness.<sup>4</sup>

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